BEST AVAILARI F COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

097688/7

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			32 minus 20=		* -12		X\$ 9=		OR	X\$18=	216	
INDEPENDENT CLAIMS			3 minus 3 =		* — ð		X40=		OR	X80=		
ΜL	LTIPLE DEPEN	RESENT				+135=		OR	+270=			
* If the difference in column 1 is less than zero,					r "0" in c	olumn 2	TOTAL			TOTAL	926	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A	*****	CLAIMS REMAINING AFTER . AMENDMENT	44.46 94.49	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	C AINA	=	X40=		OR	X80=		
<u> </u>	FIRST PRESE	NTATION OF MI	JETIPLE DEF	PENDEN	CLAIM		+135=		OR	+270=		
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		ADDIT. I EE			ADDIT: 1 EE					
AMENDMENT B	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	- 01 4114	<u> </u> =	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JUIPLE DEF	ENDEN	CLAIN		+135=		OR	+270=		
							TOTAL			TOTAL		
		(Column 1)		(Colur	mn 2)	(Column 3)	ADDIT. FEE			ADDIT. FEE		
AMENDMENT C	ara arab ara arab	CLAIMS REMAINING AFTER AMENDMENT	* * * * * * * * * * * * * * * * * * *	HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X40=		OR	X80=		
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=		OR	+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											